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MAY 1 6 2005	MAY 1 ( 2005 6)		F	P.O. Box 1450 Alexandria, Virg	ginia 22313-1450	Ina	
MSTRUCTIONS Unis for appropriate All Striker cor- indical Corrected	should be ased for tran respondence including the lacelow or directed otherwise	smitting the ISSU Patent, advance or in Block 1, by (a	or <u>Fax</u> JE FEE and PUBLI  ders and notification  ) specifying a new	(703) 746-4000 ICATION FEE (if requ n of maintenance fees v correspondence address:	ired). Blocks 1 through 5 si vill be mailed to the current and/or (b) indicating a sepa	hould be completed where correspondence address as arate "FEE ADDRESS" for	
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	90 02/16/2005			have its own certificate	e of mailing or transmission.		
Randy J. Pritzker Wolf, Greenfield & 600 Atlantic Avenu Boston, MA 02210	ıe			I hereby certify that the States Postal Service vaddressed to the Mai transmitted to the USP	rtificate of Mailing or Trans nis Fee(s) Transmittal is being with sufficient postage for fir I Stop ISSUE FEE address TO (703) 746-4000, on the c	g deposited with the United st class mail in an envelope above, or being facsimile date indicated below.	
05/19/2005 HABI	DELR3 00000098 0974870	)			-	(Depositor's name) (Signature)	
01 FC:1501 1400.00 OP				(Date)			
02 FC: 1504  APPLICATION NO.	FILING DATE	0.00 OP	FIRST NAMED INVE	NTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/748,700 🗸	12/22/2000		Richard Schube	ert	A0312/7388/MXS	4554	
TITLE OF INVENTION: D	EVICE FOR USE IN CONT	ROLLING A SAM	MPLE RATE				
APPLN, TYPE	SMALL ENTITY	ISSUE FI	EE F	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		\$300	\$1700 05/16/2005		
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TRAN, KHAI 26			375-355000				
CFR 1.363).  Change of correspond Address form PTO/SB/12  "Fee Address" indicate	e address or indication of "Fe ence address (or Change of 622) attached. ion (or "Fee Address" Indica or more recent) attached. Use	Correspondence	2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
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(A) NAME OF ASSIGN	EE	(B	s) RESIDENCE: (CI	TY and STATE OR CO	UNTRY)		
Analog Dev	ices, Inc.		Norwo	ood, Massachus	etts	·	
Please check the appropriate	assignee category or category	ries (will not be pr	inted on the patent)	: 🔲 Individual 🖾 C	orporation or other private gro	oup entity Government	
4a. The following fee(s) are enclosed:  4b. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.							
	mall entity discount permitte		_	Payment by credit card. Form PTO-2038 is attached.			
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5. Change in Entity Status  a. Applicant claims SI	(from status indicated above MALL ENTITY status. See 1	)			LL ENTITY status. See 37 C		
<u> </u>			tion Fee (if any) or to I from anyone other Office.	o re-apply any previousl than the applicant; a regi	y paid issue fee to the applica istered attorney or agent; or the	ition identified above. ne assignee or other party in	
Authorized Signature	Sys			Date5	-16-05		
Typed or printed name				Registration	No. 27,900	<u>.</u>	
This collection of information an application. Confidentialisubmitting the completed applies form and/or suggestions Box 1450, Alexandria, Virginia 22313-Linder the Panemork Reduction	n is required by 37 CFR 1.3 ty is governed by 35 U.S.C. plication form to the USPTO for reducing this burden, sh nia 22313-1450. DO NOT 5 1450.	11. The information 122 and 37 CFR 122 and 37 CFR 123 CFR 124 CFR 125	in is required to obta 1.14. This collection depending upon the chief Information COMPLETED FORM	in or retain a benefit by to is estimated to take 12 in individual case. Any co Officer, U.S. Patent and MS TO THIS ADDRESS	the public which is to file (and minutes to complete, includir mments on the amount of tin Trademark Office, U.S. Dep. S. SEND TO: Commissioner displays a valid OMB control	by the USPTO to process) g gathering, preparing, and ne you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,	
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